PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

| C | CLAIMS AS FILED - PART I | | | | 19029375 | | | |
|--|--|------------------------|--------------------|-----------------------|--------------|-------------------|-----------------|--|
| TOTAL CLAIMS | | lumn 1) | (Column 2) | SMAL TYPE | LENTITY | (| онт пэнто | |
| 1 | | ` | | | | ORS | MALL ENTI | |
| FOR | NUM | BER FILED | NUMBER EXTR | RAT | | 1 [| RATE FE | |
| TOTAL CHARGEABLE | CLAIMS . | | | BASIC I | EE | OR BAS | IC FEE | |
| INDEPENDENT CLAIMS | | minus 20= | , | X\$ 25 | = | OB XS | 50= | |
| MULTIPLE DEPENDENT | | minus 3 = | | X100 | | 1. | 00= | |
| | | | | 1 1 | | JOR X2 | 00= | |
| f If the difference in col | umn 1 is less than | zero, enter " | '0" in column 2 | +180= | | OR +36 | 50= | |
| CLAIM | S AS AMENDI | ED - PART | П | TOTAL | | OR TOT | TAL | |
| 10/ / (Col | umn 1) | (Column | | 3) SMALL | ENTITY | ОТІ | HER THAN | |
| | AINING TER | HIGHES NUMBE | R ppses | 7 | ADDI. | OR SMA | LL ENTITY | |
| E TOOY OF AMEN | DMENT | PREVIOUS PAID FO | SLY FYTRE | RATE | TIONAL | RAT | ADDI- TIONAI | |
| O Total | Minus | . 38 | <i>J.</i> | 1 | FEE | - | FEE | |
| Independent | 7 Minus | 1:0 | = /- | X\$ 25= | | OA X\$50 |)= / | |
| FIRST PRESENTATION | OF MULTIPLE DE | PENDENT CL | AIM | - X100= | | OR X200 | = | |
| | | | | +180= | | 1200 | 1/- | |
| | | | | TOTAL | | P +360= | ν | |
| m (Colum | 1S | (Column 2 |) (Column 3) | ADDIT, FEE | | ADDIT, FE | Ē | |
| REMAIN AFTE | IING R | HIGHEST | 00505 |] | ADDI- | | | |
| Total Independent Independent | | PREVIOUSLY PAID FOR | EXTRA | RATE T | IONAL | RATE | ADDI: TIONAL | |
| Independent . | Minus | ** | = | X\$ 25= | FEE | . | FEE | |
| FIRST PRESENTATION | Minus | *** | = | | Or- | X\$50= | | |
| FIRST PRESENTATION C | IF MULTIPLE DEPE | NDENT CLAIN | A 🔲 | X100= | OR | X200= | | |
| | | | | +180= | OR | +360= | | |
| | | | | TOTAL ADDIT, FEE | | TOTAL | | |
| (Column CLAIMS | | (Column 2) | (Column 3) | MOON, FEE L | | ADDIT. FEE | | |
| | G | HIGHEST NUMBER | PRESENT | AD | DI I | | | |
| AMENDME | IT T | PREVIOUSLY PAID FOR | EXTRA | RATE TIO | VAL | RATE | ADDI- TIONAL | |
| Total . | Minus | | = | FE FE | E | | FEE . | |
| Independent * | Minus | 1-4 | = | X\$ 25= | OR | X\$50= | | |
| FIRST PRESENTATION OF | MULTIPLE DEPEN | DENT CLAIM | | X100≈ | OR | X200≃ | | |
| the entry in column | • | | | +180= | -1°''F | | | |
| I the entry in column 1 is less than I the "Highest Number Previously I the "Highest Number Previously The "Highest Number Previously | the entry in column 2 Pald For* IN THIS CO. | wille "0" in colu | nn 3. | TOTAL | OR | +360= | | |
| The 'Highest Number Previously F | | | | DDIT. FEE | OR AD | TOTAL DIT. FEE | | |
| PTO-875 (Rev. 10/04) | Crotator indep | rendent) is the h | lghest number tout | nd in the appropriate | box le colum | n 1 | | |